

Check all which apply:

| For Office Use Only | | | | | | |
|------------------------------|---------------|--|--|--|--|--|
| Date Application Received: _ | By (Initial): | | | | | |
| Date Payment Received: | By (Initial): | | | | | |

Proposed license endorsement(s):

Check all which apply

PLAN REVIEW APPLICATION FOR FOOD SERVICE ESTABLISHMENTS Menu Change and/or Endorsement Addition

Montana Administrative Rules for Food Service Establishments - *Plan Submission and Approval* requires a <u>copy of plans and specifications</u> be submitted **PRIOR TO** *establishing a new retail/wholesale food establishment* OR *remodeling an existing establishment to expand or add food processing/food service facilities* AND *as a condition of obtaining a license to operate*. **This plan review is required in addition to any City/County/State permits** - the applicant is responsible for contacting the individual entities (planning, fire, zoning, other) to ensure compliance with their requirements.

The completed Plan Review application and payment should be submitted to Environmental Health, City-County Health Department at least 30 calendar days before **any** alterations will begin.

| Menu Change for Currently Licensed Establishment | t Food Service Establishment Perishable Food Dealer (retail only) |
|---|---|
| Menu Review for New Establishment in | Tavern or Bar |
| Community/Shared Kitchen (no additional | Food Service/Catering (retail)** |
| equipment/remodel of existing facility) | Meat Market (onsite retail only) |
| | Food Service/Delicatessen (onsite retail) |
| License Endorsement Addition** | Bakery (onsite retail only) |
| | Produce (onsite retail only) |
| **To add Catering, use "Catering Endorsement Applicatio | |
| ррини | Mobile |
| | Food Manufacturer (onsite retail only) |
| Fee St | <u>ructure</u> |
| Menu Change/Review: \$125 | Expedited Review Fee: \$200 |
| - For new establishments, includes pre-opening | Required when application submitted less than 30 |
| inspection and one endorsement | calendar days from intended open date |
| For existing establishments, includes addition of | , , , |
| one license endorsement | Additional Walk-Through/Pre-opening Inspections: |
| | \$100 Each |
| Additional Endorsements: \$50 each | |
| | |
| Allow a minimum of 30 calendar days for conditional expedited review fee. Full payment is when the review has been completed. Incomplete applicational for completion. I have contacted City/County/State entities to ensure | is required before review begins. CCHD will contact you ations will not be reviewed and will be returned to |
| APPLICANT SIGNATURE | DATE |
| Submit completed application and full payment to: City-County Health Department, Environmental Health D Attn: Plan Review 115 4 th St. South, Great Falls, Montana, 59401 | Department |
| | |



Food Establishment Inspection Checklist for Pre-opening Health Department Inspection (day of licensing) KEEP THIS PAGE FOR YOUR REFERENCE

| All plumbing, mechanical, and electrical inspections must be completed by the appropriate building authority. |
|---|
| All refrigeration and freezer units must be on and at temperature (41°F or lower for refrigerators, 0°F for freezers). All units must have visible working thermometers. |
| All refrigerated make tables, steam tables, warmers, or other temperature regulating units must be on, at temperature, and setup as it they were ready to serve food. Have all inserts or hot pans in the units and water in at least one insert per unit. Hot hold units must be able to hold 135°F or higher and cold units 41°F or lower. |
| Have hot and cold running water at all sinks. |
| Have soap and paper towel dispensers installed at each hand sink and stocked. |
| Have sanitizer set up at the correct concentration. If you are using an automatic system, have it dispensing at the proper concentration. |
| Have the appropriate test strips for the sanitizer you choose to use. |
| Have your dishwasher ready and able to sanitize. If you have a chemical system, have the correct test strips available. |
| Have all surfaces finished. This means floors, walls, ceilings, insides of walk-in units, cupboards, etc. There cannot be any raw wood or unfinished surface. Any sections of the walls, floors, ceilings, or cupboards which have been cut away to accommodate plumbing, wiring, etc., must be tightly sealed to prevent pest entry and to aid cleanability. |
| All floors, walls, and ceilings in food prep areas or areas subject to high moisture must be non-absorbent. |
| All lighting must be shielded. |
| All hoods must be properly installed, inspected, and serviced. |
| Proper air gaps and backflow prevention must be in place where required. |
| All equipment must be onsite and in place as per the approved floor plans. |
| Restroom must be fully equipped. |
| All construction activities must be completed, and all construction related equipment and debris removed from the premises. |
| All conditions cited in the approval letter must be addressed. |
| |

You should set up as though you intend to serve your first customer at the end of the pre-opening inspection. You do not need food onsite, but all of the equipment must be working and ready, and all of your facility cleaned and sanitized for service.



KEEP THIS PAGE FOR YOUR REFERENCE

Commercial Kitchen Equipment/Sink Guidelines

- Food-contact surfaces must be (§4-202.11):
 - Smooth:
 - Free of breaks, open seams, cracks, chips, inclusions, pits, and similar imperfections;
 - Free of sharp internal angles, corners, and crevices;
 - Finished to have smooth welds and joints; and
 - Accessible for cleaning and inspection by one of the following methods:
 - Without being disassembled,
 - By disassembling without the use of tools, or
 - By easy disassembling with the use of handheld tools commonly available to maintenance and cleaning personnel such as screwdrivers, pliers, open-end wrenches, and Allen wrenches.
- Equipment should be easily movable:
 - Portable; mounted on casters, gliders, or rollers; or provided with a mechanical means to safely tilt a unit of equipment for cleaning; and
 - Having no utility connection, a utility connection that disconnects quickly, or a flexible utility connection line of sufficient length to allow the equipment to be moved for cleaning of the equipment and adjacent area.
- Equipment that is not easily moveable shall be either sealed to the floor or mounted on legs that provide at least six inches of clearance between the equipment and the floor (§4-402.12) or, in the case of counter-mounted equipment, 4 inches of clearance between the equipment and the counter.
- Equipment should be commercially rated (§4-205.10). "Homestyle" equipment (i.e. non-commercial refrigerators or ovens) is not designed for the continual use that a commercial kitchen demands, and may fail to maintain proper temperatures or operate consistently.
- Temperature measuring devices must be placed so as to measure the air temperature, or product temperature, in the warmest part of a refrigerated unit or the coolest part of a hot hold unit.
- There must be a 3-compartment ware washing sink, even if there is a mechanical dish machine present. Sink compartments of a 3-compartment ware washing sink must be large enough to accommodate immersion of the largest equipment and utensils used in the kitchen, unless the equipment is clean-in-place (§4-301.12).
- A food preparation sink must be provided if food is placed into a sink or sink compartment for the purposes of thawing or cleaning (§4-301.12(F)).
- There must be enough handwashing sinks so that at least one is available for convenient use by employees in all food preparation areas of the establishment; there may be no less than one handwashing sink (§5-203.11). Handwashing sinks may be used for no other purpose than handwashing, and must be accessible at all times (§5-205.11). Handwashing sinks must provide water that is at least 100°F. Self-closing faucets must provide a flow of water for at least 15 seconds without reactivation (§5-202.12).
- At least one service sink, or mop sink, must be provided and conveniently located for cleaning mops and other floor cleaning tools and for the disposal of mop water and other liquid waste. Toilets and urinals may not be used for disposal of mop water (§5-203.13).



KEEP THIS PAGE FOR YOUR REFERENCE

Employee Hygiene Guidance and Requirements

The purpose of this guidance document is to encourage employee practices and behaviors that can help prevent food handlers from spreading viruses and bacteria to food that cause foodborne illness outbreaks.

Section 2-103.11(M) of the ARM states that management has the responsibility to inform and monitor conditional employees(new hires) or food employees to ensure that they have good hygienic practices and know when they should not come to work because of illness.

Should employees exhibit the following symptoms, refer to section 2-201 of the 2013 FDA Food Code to determine when a food handler should be excluded or restricted from food handling duties:

- Vomiting
- Diarrhea
- Jaundice (yellow skin or eyes)
- Sore throat with fever
- Infected cuts and burns with pus on hands and wrists

Below is a list of highly-infective pathogens that are transmissible through food and cause severe illness:

- 1. Norovirus
- Hepatitis A virus
- 3. Salmonella Typhi
- 4. Shigella spp.
- 5. Escherichia coli (E. coli) O157:H7 (or other Enterohemorrhagic or Shiga toxin-producing E. coli)
- 6. Other enteric bacterial pathogens such as Salmonella or Campylobacter

If an employee has been diagnosed by a health practitioner to have any of these pathogens, prior to returning to work, they must be cleared by their health practitioner and the Health Department. In lieu of a diagnosis of any of these pathogens, employees can return to work if they have been free of the symptoms listed above for 24 hours or more.

Additional Resources

Employee Health and Personal Hygiene Handbook:

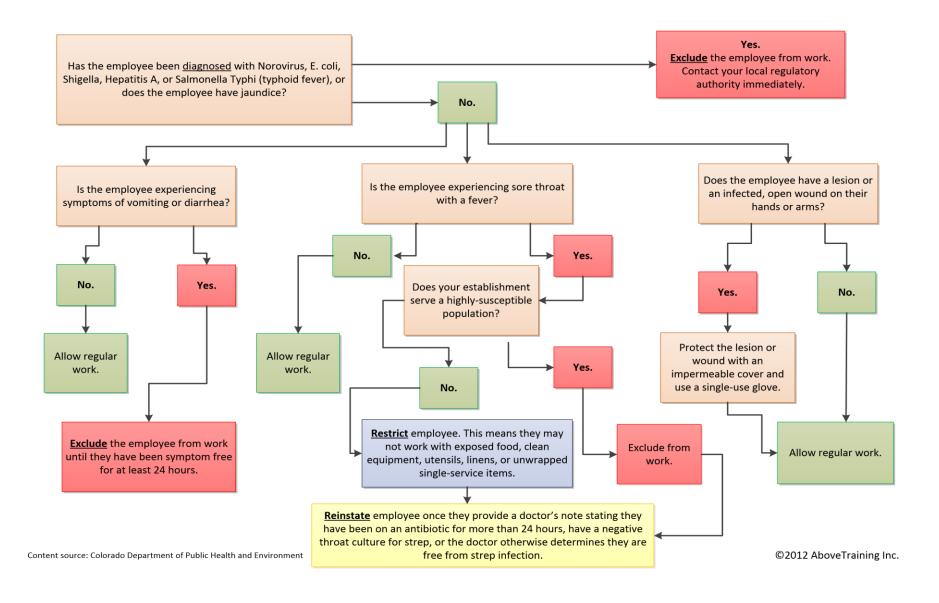
http://www.fda.gov/Food/GuidanceRegulation/RetailFoodProtection/IndustryandRegulatoryAssistance and Training Resources/ucm113827.htm

Communicable Disease Manual:

https://www.colorado.gov/pacific/cdphe/communicable-disease-manual



EMPLOYEE ILLNESS FLOWCHART - KEEP THIS PAGE FOR YOUR REFERENCE



| Plan Review Form | | | | | | | |
|--------------------------------|--------|--|--|--|--|--|--|
| Establishment Information | | | | | | | |
| Name of Establishment: | Phone: | | | | | | |
| Street Address: | Cell: | | | | | | |
| City: | Fax: | | | | | | |
| State/Zip: | Email: | | | | | | |
| County: | | | | | | | |
| Business/Ownership Information | | | | | | | |
| Individual or Corporate Name: | Phone: | | | | | | |
| Street Address: | Cell: | | | | | | |
| City: | Fax: | | | | | | |
| State/Zip: | Email: | | | | | | |
| Contact Information | | | | | | | |
| Name of Primary Contact: | Phone: | | | | | | |
| Street Address: | Cell: | | | | | | |
| City: | Fax: | | | | | | |
| State/Zip: | Email: | | | | | | |
| Name of Architect: | Phone: | | | | | | |
| Street Address: | Cell: | | | | | | |
| City: | Fax: | | | | | | |
| State/Zip: | Email: | | | | | | |
| Name of Contractor: | Phone: | | | | | | |
| Street Address: | Cell: | | | | | | |
| City: | Fax: | | | | | | |
| State/Zip: | Email: | | | | | | |

| Date | of | p | anned | open | ina (| (for | new | esta | abl | lis | hmei | nts | on | lν |) : |
|------|----|---|-------|------|-------|------|-----|------|-----|-----|------|-----|----|----|------------|
| | | - | | | 3 | • | | | | | | | | ٠, | <i>)</i> - |



| | If the | re is a bre | | urs below | in the f | | ormat: | on 8am to 8pm line to insert | additional | hours. | |
|--|--|-------------|--|----------------|-------------|-----------|--------|------------------------------------|------------|---------|----------|
| Days | | Sunday | Monday | Tue | sday | Wedne | sday | Thursday | Frid | ay | Saturday |
| Hour | s | to | to | t | to | | | to | to | | to |
| Hour | s | to | to | t | to | | | to | to | | to |
| | · | | For seasonal operations, check all that apply. | | | | • | | | | |
| Jan | Feb | Mar | Apr | May | May Jun Jul | | Aug | Sept | Oct | Nov | Dec |
| | Projecto kfast | ed daily r | maximum r | number Lunc | | als to be | serve | d per shift, | where a | pplicat | ole. |
| Maximum number of kitchen staff per shift, where applicable. Breakfast Lunch Dinner | | | | | | | | | | | |
| STORAGE AREAS: | | | | | | | | | | | |
| ST | A. Where are employee personal items (i.e. purses, jackets) stored? Circle below Lockers Closet Coat rack Break room/area Other | | | | | | | | | | |
| ST | | ers (| Closet | Coat rad | ck | Break ro | om/are | ea Othe | er | | |
| ST | Lock | | hments in s | | | | | ea Othe our establish | | | |
| ST | Lock B. For equipm | r establis | hments in s | shared ki | itchens | | does y | our establisl | | ore foo | d and/or |



| FOOD |) : | | |
|---------------------------------|---|---|---|
| Attach A | ALL menus (beverage, appo | etizer, breakfast, lur | nch, dinner, etc.) |
| | | | ging or specialized processes as defined in nods be conducted? YES NO |
| specificate each cate and for a | tions sheets for the equipm | nent that will be used sed in this manner. ACCP application p | • • |
| | Curing food | | |
| | · · | • , | nethod of food preservation |
| | | | ng/modified atmosphere packaging use as food and not for sale in a retail |
| | Operating a molluscan sh | • • | ystem display tank |
| _ | Sprouting seeds or beans | 5 | |
| Ш | Other: | | |
| temperatu | ure checks and what foods | s and/or equipment | be monitored. Provide the frequency of will be monitored. If logs or other types of temperatures, please attach copies. |
| | | | |
| | | | |
| C. w | ill cooked foods be cooled? | YES NO | |
| | hat methods will be used to ircle all that apply. | o rapidly cool cooke | d foods to 41°F (5°C) or below? |
| Unde | r refrigeration | Ice water bath | Adding ice as an ingredient |

Shallow pans



Rapid cooling equipment

Other:____

Separating food into smaller portions

| | sausages, yogurts, etc. |
|----|---|
| | Will foods be reheated and then held hot before being served? YES NO If yes, please explain how they will be rapidly reheated to above 165°F (74°C) within 2 hours. |
| | 1. List the equipment that will be used for reheating: |
| In | How will frozen foods will be thawed(circle). der refrigeration Under running water In a microwave |
| S | Will catering be conducted? YES NO |
| | Will food be transported or delivered to another location? TYES NO If yes, please list the equipment that will be used to maintain food at proper temperatures during transport. |
| | |

| J. | Will the establishment prepare foods that will be sold to other retail food establishment | | | | | | | | |
|----|---|--------|-------------|--|--|--|--|--|--|
| | □YES □NO | | | | | | | | |
| | If yes, please visit http://dphhs.mt.gov/publichealth/FCSS , then click "Food safety", then click "Wholesale food" to obtain information on registering as a wholesale food purveyor. | | | | | | | | |
| K. | How will bare hand contact with ready-to-eat foods be eliminated during preparation? (Circle below) | | | | | | | | |
| | Utensils | Gloves | Deli Tissue | | | | | | |

Resources

General Information

MT Department of Public Health and Human Services (DPHHS), Rules for Retail Food Establishments (Adminstrative Rules of Montana)

https://dphhs.mt.gov/Portals/85/publichealth/documents/FCS/FinalRetailRule.pdf

Food and Consumer Safety Section (FCSS), Retail Food

https://dphhs.mt.gov/publichealth/FCSS/RetailFood or guick search MT FCSS

FDA Food Code, 2013

https://www.fda.gov/food/fda-food-code/food-code-2013

PDF version for download

https://www.fda.gov/media/87140/download

2017 FDA Food Code (will be adopted in the near future)

https://www.fda.gov/food/fda-food-code/food-code-2017

Food Service Establishment Licensing - Cascade County

https://www.cchdmt.org/environmental-health/food-establishment-safety/food-service-establishment-licensing/

Food Recalls

DPHHS

https://dphhs.mt.gov/publichealth/fcss/recalls

USDA

https://www.fsis.usda.gov/wps/portal/fsis/topics/recalls-and-public-health-alerts/current-recalls-and-alerts

FDA

https://www.fda.gov/Safety/Recalls/default.htm

Food Safety News

Subscribe to Food Safety News and receive an email (5 to 6 articles) every morning about food safety in the US and world

Food Safety News info=foodsafetynews.com@send.aweber.com

Federal Food Safety Information

https://www.foodsafety.gov/news/index.html

Employee Hygiene

Employee Health and Personal Hygiene Handbook

https://www.fda.gov/food/retail-food-industryregulatory-assistance-training/retail-food-protection-employee-health-and-personal-hygiene-handbook

PDF download

https://www.fda.gov/media/77065/



Food Worker Handwashing and Food Preparation

https://www.cdc.gov/nceh/ehs/ehsnet/plain_language/food-worker-handwashing-food-preparation.htm

Sample Handwashing Policy

https://dphhs.mt.gov/Portals/85/publichealth/documents/FCS/SampleHandwashingPolicy.pdf

Sample Written Employee Health Policies

 $\underline{https://dphhs.mt.gov/Portals/85/publichealth/documents/FCS/WrittenEmployeeHealthPolicyExamples.pdf}$

Handwashing posters

https://dphhs.mt.gov/Portals/85/publichealth/documents/FCS/HandWashingPosters.pdf

Plan Review

2016 MT DPHHS Food Service Establishment Plan Review Manual

https://dphhs.mt.gov/Portals/85/publichealth/documents/FCS/plan-review-for-food-establishments-guide-2016-final.pdf?ver=2017-02-07-141842-683

Miscellaneous

Bacteria and viruses as sources of food poisoning

https://www.foodsafety.gov/food-poisoning/bacteria-and-viruses

Animals in Food Service Establishments

 $\underline{https://dphhs.mt.gov/Portals/85/publichealth/documents/FCS/Animals\%20in\%20Food\%20Service\%20brochure.pdf}$

Food Allergy information

https://www.fda.gov/food/buy-store-serve-safe-food/what-you-need-know-about-food-allergies

Temperature dangers

https://www.webstaurantstore.com/article/29/following-food-safety-temperatures.html

https://www.foodsafety.gov/food-safety-charts/safe-minimum-cooking-temperature

https://www.fsis.usda.gov/wps/portal/fsis/topics/food-safety-education/get-answers/food-safety-fact-sheets/safe-food-handling/danger-zone-40-f-140-f

https://www.fsis.usda.gov/wps/portal/fsis/topics/food-safety-education/get-answers/food-safety-fact-sheets/safe-food-handling/how-temperatures-affect-food

USDA Food Safety Fact Sheets

https://www.fsis.usda.gov/wps/portal/fsis/topics/food-safety-education/get-answers/food-safety-fact-sheets

What to do (or not to do) during an inspection

Inspection guidelines (General information)

https://www.webstaurantstore.com/article/16/health-inspection-checklist.html

https://www.markelinsurance.com/-/media/specialty/risk-management/small-business/fc-policyholder-training-series/things-health-inspectors-look-

for.pdf?la=en&hash=210E1830F3D1B1FCA48D618694A0028030006938

https://freshideas.maines.net/health-inspectors/

